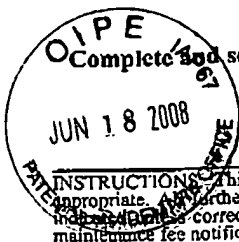


## PART B - FEE(S) TRANSMITTAL

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Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSU/FEE  
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|                         |                    |
|-------------------------|--------------------|
| Nanci M. Kertson        | (Depositor's name) |
| <i>Nanci M. Kertson</i> | (Signature)        |
| June 18, 2008           | (Date)             |

22932 7590 03/19/2008  
IMMUNEX CORPORATION  
LAW DEPARTMENT  
1201 AMGEN COURT WEST  
SEATTLE, WA 98119  
06/19/2008 WASFAW2 00000025 090089 09778187

01 FC:1501 1440.00 DA  
02 FC:1504 300.00 DA  
03 FC:8001 18.00 DA

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|
| 09/778,187      | 02/06/2001  | Peter Robert Baum    | 2873-US-CIP         | 9057             |

TITLE OF INVENTION: MOLECULES DESIGNATED LDCAM

| APPLN. TYPE    | SMALL ENTITY | ISSUE FEE DUE | PUBLICATION FEE DUE | PREV. PAID ISSUE FEE | TOTAL FEE(S) DUE | DATE DUE   |
|----------------|--------------|---------------|---------------------|----------------------|------------------|------------|
| nonprovisional | NO           | \$1440        | \$300               | \$0                  | \$1740           | 06/19/2008 |

| EXAMINER          | ART UNIT | CLASS-SUBCLASS |
|-------------------|----------|----------------|
| OUSPENSKI, ILIA I | 1644     | 435-032000     |

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☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

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(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 James E. Klaniecki

2 \_\_\_\_\_

3 \_\_\_\_\_

## 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

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(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

IMMUNEX CORPORATION

Thousand Oaks, CA

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

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☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 09-0089 (enclose an extra copy of this form).

## 5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

*James E. Klaniecki*

Date June 18, 2008

Typed or printed name

James E. Klaniecki

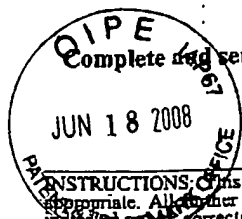
Registration No. 38,207

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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ZZ932

7590

03/19/2008

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1201 AMGEN COURT WEST  
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| Nanci M. Kertson        | (Depositor's name) |
| <i>Nanci M. Kertson</i> | (Signature)        |
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Thousand Oaks, CA

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Authorized Signature *James E. Klaniecki*

Date June 18, 2008

Typed or printed name James E. Klaniecki

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